



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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Attorney Docket No.: DEX-0245  
Inventors: Recipon et al.  
Serial No.: 10/034,934  
Filing Date: October 26, 2001  
Examiner: Not yet assigned  
Group Art Unit: 1633  
Title: Compositions And Methods Relating To Lung  
Specific Genes And Proteins

I, Kathleen A. Tyrrell, Registration No. 38,350, certify that this correspondence is being deposited with the U.S. Postal Service as First Class mail in an envelope addressed to the U.S. Patent and Trademark Office, P.O. Box 2327, Arlington, VA 22202.

On this date: May 29, 2002

  
Kathleen A. Tyrrell, Registration No. 38,350

U.S. Patent and Trademark Office  
Box Fee Amendment, P.O. Box 2327  
Arlington, VA 22202

Dear Sir:

PRELIMINARY AMENDMENT

Please enter the following amendment and remarks into the record:

In the specification:

Please replace the paragraph at page 1, lines 4-7, as follows:

--This application claims the benefit of priority from U.S.

Provisional Application Serial No. 60/243,461 filed October 26,

Adjustment date: 07/02/2002 MMARMOL  
07/12/2002 MPASASO 00000009 10034934  
01 FC:104 -280.00 GP

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# AMENDMENT TRANSMITTAL LETTER (Large Entity)

Applicant(s): Recipon et al.

Docket No.

DEX-0245

Serial No.

10/034,934

Filing Date

October 26, 2001

Examiner

Not yet assigned

Group Art Unit

1633

Inventor(s) Compositions and Methods Relating To Lung Specific Genes and Proteins

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TO THE ASSISTANT COMMISSIONER FOR PATENTS

TECH CENTER 1600/2900

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

## CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	19 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input checked="" type="checkbox"/>					\$280.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$280.00

See attached USPTO Credit Card Payment Form

- ☐ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_  
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \_\_\_\_\_ to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619  
A duplicate copy of this sheet is enclosed.
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Dated: May 29, 2002

Kathleen A. Tyrrell, Registration No. 38,350

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CC: